PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/522008

CLAIMS AS FILED - PART I												THO.
(Column 1) (Column 2)								SMALL ENTITY TYPE		OF	OTHER THAN OR SMALL ENTITY	
U.	S. NATIONAL	STAGE FEES			Γ	(Column 2)	7	DATE	T	¬ ``		CHILL
ВА	SIC FEE		SMALL EN	IT = \$ 150	105	OCE ENT - 0000	┨╶	RATE	FEE	4	RATE	FEE
FX	AMINATION F		Satisfies PCT		<u> </u>	RGE ENT. = \$ 300 other situations =	4	BASIC FEE		OR	BASIC FEE	120
			(4) = \$ 5 U.S. is ISA =	0/\$ 100		\$ 100 / \$ 200	1	EXAM. FEE	<u></u>		EXAM. FEE	20
SEARCH FEE			ALL other c	ALL other countries = \$ 200 / \$ 400		sther situations = \$250 / \$500		SEARCH FEE		1	SEARCH FEE	4/1/
FEE FOR EXTRA SPEC. PGS.			mi	nus 100 =		<i>1</i> 50 =] -	X \$ 125 =		7	X \$ 250 =	100
TOTAL CHARGEABLE CLAIMS			/6 m	inus 20 =	*			X \$ 25 =	 	OR	 	F-32
IND	EPENDENT C	LAIMS	1 4	minus 3 =		/	1	X \$ 100 =	 	OR	X \$ 200 =	00
MULTIPLE DEPENDENT CLAIM PRESENT						1	+ \$ 180 =	 	OR		4XVV	
* If the difference in column 1 is less than zero, enter "0" in column 2						1 !	TOTAL	 	OR	+ \$ 360 =	1117	
									<u> </u>] (,,	TOTAL	V/UL
CLAIMS AS AMENDED - PART II											OTHER	THAN
_		(Column 1)	T	(Column 2). (Column 2).			SMALL		ENTITY	OR	SMALL ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	FEE
	Independent	*	Minus	***		=	İ	X \$ 100 =		OR	X \$ 200 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT.		OR	TOTAL ADDIT.	
								FEE		J OIX	FEE	
_		(Column 1)		(Columi		(Column 3)	_					
X H		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE:
	Total	*	Minus	**		=	Γ	X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		= ,		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR -	+ \$ 360 =	
TOTAL ADDIT.										L	TOTAL ADDIT.	
FEEOR FEE												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
					•		2	- Phiopiedic DOX I	o column 1.			